

Abstract 368

TITLE: Peer Outreach to IDUs in Rural Hawaii

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ISSUE: It is difficult for HIV prevention service providers to access IDUs in Hawaii's rural communities. IDU concerns about confidentiality in small communities can limit participation in harm reduction and prevention services that are delivered by traditional outreach staff.

SETTING: Rural East Hawaii for active IDUs who may or may not access mobile syringe exchange and harm reduction services.

PROJECT: DOH's CHOW Project, which provides syringe exchange and prevention services to IDUs, gave a 10 hour peer outreach training on December 10 and 11, 1997 to 8 current clients (5 men and 3 women) selected by the local CHOW worker. Participants were given an incentive of \$10 per hour. HIV transmission and harm reduction topics were discussed. All participants completed the training and remain active in monthly follow up meetings through March 1999. Meetings have been increasingly driven by the participants and the topics are related to prevention and other issues identified by IDUs.

RESULTS: The peer workers consistently report that they are enthusiastic and feel empowered by dealing with the issues of their own community. All eight peer workers reported that in the 20 days after the training in December 1997, they began outreach to other IDUs to make them aware of syringe exchange and encourage them to make use of the services. In addition, all eight reported that they collected used syringes and carried out secondary exchanges on behalf of IDUs who did not yet trust the confidentiality of the exchange program. The CHOW field worker verified the increased volume of syringe exchanged by these peer workers. Field reports show that in December, 1701 syringes exchanged in 53 anonymous exchange visits compared to 531 syringes exchanged averaged 1,758 per month compared to 732 and exchange visits averaged 57 per month compared to 26 in the same period of the previous year. In March 1999, all 8 of the peer workers reported being active in outreach. Seven continue to carry out secondary exchanges and four report that IDUs for whom they previously exchanged are now exchanging directly for themselves. The peer workers reported that the new exchangers have developed sufficient confidence in the CHOW Project to exchange themselves.

LESSONS LEARNED: In rural communities active IDUs can be successfully engaged as peer outreach workers providing prevention education and linkages with syringe exchange programs. Exchange site data and participant informers indicate that peer outreach can reach new exchangers and increase the number of syringes exchanged.

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